



Restarting Medicaid Renewals The End of the Continuous Enrollment Requirement

Medicaid Renewal Community Meeting

Department of Health Care Finance

March 29, 2023



Presentation Overview



- Background on Medicaid Renewals
- What to Expect
- Key Messages for Beneficiaries and Stakeholders
- Communication and Notices on Medicaid Renewal
- Next Steps
- Q&A



Medicaid Beneficiaries Will Have to Renew Their Coverage for the First Time in 3+ Years



- In March 2020, CMS temporarily waived the need to renew Medicaid coverage and states received a 6.2% financial boost to accommodate the increased enrollment.
- Medicaid enrollment has increased ~20% since the start of the public health emergency – just over 300,000 District residents are now enrolled in Medicaid.
- At the end of 2022, Congress passed legislation ending the continuous eligibility requirement on March 31, 2023.
- The District is required to restart Medicaid eligibility **renewals beginning April 1, 2023.** (Alliance and Immigrant Children's Program renewals started in July 2022).



Medicaid Renewal Is Not the Only Thing Changing on April 1st – Managed Care Plans Also Change



- New Medicaid / Alliance managed care contracts start on April 1st
 - One new managed care plan - Amerigroup DC - joins AmeriHealth Caritas and MedStar Family Choice
 - Beneficiaries enrolled in CareFirst Community Health Plan will transition to Amerigroup DC
- Beneficiaries received postcard and letters between February and March
- Questions about managed care plan enrollment:
dchealthyfamilies.com or call 202-639-4030
- Enrolling into a managed care plan is not renewing Medicaid eligibility





DHCF Will Start The Recertification Process For Medicaid In April 2023 With Coverage Potentially Ending for Some Beneficiaries on May 31st



- The first set of notices will go out at the end of March with the first disenrollments taking place on May 31.
- By the end of the unwinding process, roughly 112,000 of 145,000 MAGI cases (77%) are expected to passively renew.
- While many Non-Magi beneficiaries cannot passively renew for their initial recertifications, there are exceptions:
 - For example, some beneficiaries in SSI eligibility codes will renew without action required by the beneficiary
 - DHCF is also implementing strategies to make renewals passive for additional Non-MAGI beneficiaries (e.g., those who receive SNAP)

Estimated Medicaid Cases Initiated for Renewal, by Month Initiated and Month Due

| Unwinding month number | Initiation month (notices mailed by 1st of month) | MAGI renewal month due | Non-MAGI renewal month due | Cases | | | | |
|------------------------|---|------------------------|----------------------------|----------------|----------------|----------------|---------------|---------------|
| | | | | Total | MAGI | | | Non-MAGI* |
| | | | | | Total | Passive | Non-passive | Total |
| 1 | 2023-04 | 2023-05 | 2023-06 | 12,102 | 9,347 | 7,032 | 2,315 | 2,755 |
| 2 | 2023-05 | 2023-06 | 2023-07 | 14,263 | 11,383 | 10,465 | 918 | 2,880 |
| 3 | 2023-06 | 2023-07 | 2023-08 | 19,530 | 16,001 | 10,451 | 5,550 | 3,529 |
| 4 | 2023-07 | 2023-08 | 2023-09 | 17,632 | 14,179 | 8,734 | 5,445 | 3,453 |
| 5 | 2023-08 | 2023-09 | 2023-10 | 20,467 | 9,105 | 7,834 | 1,271 | 11,362 |
| 6 | 2023-09 | 2023-10 | 2023-11 | 19,281 | 12,448 | 6,721 | 5,727 | 6,833 |
| 7 | 2023-10 | 2023-11 | 2023-12 | 15,237 | 13,280 | 7,832 | 5,448 | 1,957 |
| 8 | 2023-11 | 2023-12 | 2024-01 | 20,614 | 19,620 | 17,821 | 1,799 | 994 |
| 9 | 2023-12 | 2024-01 | 2024-02 | 13,050 | 9,956 | 9,003 | 953 | 3,094 |
| 10 | 2024-01 | 2024-02 | 2024-03 | 13,443 | 10,143 | 8,921 | 1,222 | 3,300 |
| 11 | 2024-02 | 2024-03 | 2024-04 | 13,887 | 10,783 | 9,439 | 1,344 | 3,104 |
| 12 | 2024-03 | 2024-04 | 2024-05 | 12,266 | 9,173 | 7,812 | 1,361 | 3,093 |
| Total | | | | 191,772 | 145,419 | 112,065 | 33,354 | 46,353 |
| Average monthly | | | | 15,981 | 12,118 | 9,339 | 2,780 | 3,863 |

Source: DHCF analysis of DCAS data as of 1/31/2023.

* Excludes certain Supplemental Security Income (SSI) cases that are “no-touch” and do not go through a regular renewal process. DHCF expects that additional non-MAGI beneficiaries will receive a passive renewal, but figures are not yet final.



States Are Required To Conduct A Renewal Of Every Beneficiary Enrolled In Medicaid Before Taking Adverse Action On Medicaid Eligibility





- MAGI Medicaid Beneficiaries (most adults under 65, pregnant women and children under 21, parents/caretaker relatives)
 - Passive renewal – Happens at the end of the month prior to mailing of renewal packets. If passively renewed, beneficiaries receive a notice their coverage is renewed and there is nothing to do
 - First notice is sent at the end of the month 60 days prior to certification end date
 - If renewal not received or there are outstanding verifications a second notice of pending termination is sent 30 days prior to certification end date
- Non-MAGI Medicaid Beneficiaries (Age 65+, blind, or person with a disability, SSI recipients, waiver participants)
 - First notice is sent at the end of the month 90 days prior to certification end date
 - If renewal not received or there are outstanding verifications a second notice of pending termination is sent 30 days prior to certification end date
- District Direct sample notices are available on the [DHCF Website](#)
- Medicaid renewal packages will have distinctive markings



Look Out For These Renewal Documents in the Mail!

GOVERNMENT OF THE DISTRICT OF COLUMBIA





SAMPLE NOTICE: Non-MAGI Renewal Form

Renewal Form for Medical Assistance

It is time to renew your **Aged, Blind, Disabled (ABD)** medical assistance coverage. You must renew your medical assistance coverage at least once a year. You must complete and return this renewal form and copies of all required documents by **6/06/30/2023** to keep your medical assistance coverage. As you complete this form, please tell us any changes that have occurred.

If there is a change in your benefits, you will get

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SAMPLE NOTICE: Long Term Care Renewal Form

Notice Date: 04/01/2023 Account ID: 999999999

JOHN DOE
441 4TH STREET, NW
WASHINGTON, DC 20001

Subject: Important Message About Determining Your Medical Assistance Coverage

Dear JOHN DOE:

It is time to renew your **long term care** medical assistance coverage. You must renew your medical assistance coverage at least once a year. You must complete and return the attached renewal form and copies of all required documents by **6/30/2023** to keep your long term care medical assistance coverage.

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Medical Assistance Renewal Form D2

April 1, 2023

John Doe
441 4th Street, NW
Washington, DC 20001

Integrated Case #: 99999

It is time to renew your health coverage. Please respond by **<Date Field>** to avoid gaps in your coverage.

You can renew your Health Coverage in any one of these

- **By mail:** Complete this form and mail it in the enclosed envelope to:
Attention:
Department of Human Services
Economic Security Administration
Outstation/Medicaid Renewal Unit



Completed Renewal Form Packet: Information Needed



The completed renewal contains:

- Carefully reviewed answers to all questions on the renewal form.
 - A signature (wet, electronic, or telephonic signature)
 - A submission of current documentation of income and D.C. residency along with renewal form.
-
- Note: Information on verifying income, verifying residency, and relevant federal poverty level information is included in the Appendix



Outreach to Beneficiaries Is More Than A Letter in the Mail...



- District Direct: Beneficiaries may log into District Direct to see notices, when their renewals will be up – and take action
- Text Messaging: All beneficiaries will be texted about updating their address and contact information next month; along with when renewal is due
- Robocalls: Beneficiaries will be called next month
- Citywide Advertising and Outreach: Advertisements have already started on bus, radio, through key partnerships_
- Beware of Scams: In other states, Medicaid programs have noted that some frauds have framed their emails and texts around. **The District will never charge money for Medicaid Renewal or ask beneficiaries to visit a website that is not a .dc.gov account!**



Dedicated Outreach to Special Populations in the District

- **Senior Beneficiaries**

- DHCF is partnering with DACL to training their staff and senior service network in early April on the renewal process.
- Seniors will then be able to access in-person assistance at Senior Wellness Centers and 40+ Community Dining Sites across the District.
- The Deaf and Hard of Hearing Senior Center and Senior Center for the Blind have also committed to assisting seniors with applications.

- **Beneficiaries Living with Disabilities**

- DHCF training employees at DDS and their providers to help beneficiaries.

- **Beneficiaries Experiencing Homelessness**

- DHCF is meeting with outreach staff, shelter case workers, and adult day centers that work with beneficiaries experiencing homelessness to ensure they are prepared to spread the word and assist beneficiaries with completing their renewals.



Communication on Medicaid Renewal– Outreach to Beneficiaries

- DHCF will send Renewal Packets to beneficiaries who cannot passively renew coverage.
- The District will text the cell numbers of beneficiaries to ask beneficiaries to update their address and/or complete their renewal packet.
- The District will conduct automated phone calls to ask beneficiaries to update their contact information and/or complete their renewal packet.
- DHCF increased staffing at the Public Benefits Call Center to be able to field questions and concerns. The center can also update addresses for beneficiaries.
- DHCF and DHS are increasing staffing at DHS Service Centers to be able to process more applications.
- DHCF is training groups such as this one on how to update contact information and renew Medicaid



Communication on Medicaid Renewal–External Outreach




- The District wants to join meetings of key stakeholders to explain Medicaid Renewal
 - DHCF staff would attend meetings hosted by your stakeholder group -or that you know about –*send invites to us via email at Medicaid.restart@dc.gov.*
- The District provided a Stakeholder Toolkit to guide public outreach from stakeholders (draft social media, etc.), walk through the District Direct enrollment process, provide fliers for distribution, and more.
- The District created a website with information on Medicaid Renewal and the End of the Public Health Emergency that will host the Unwinding Plan, Stakeholder Toolkit, meeting info, etc.
- The District will hold regular public meetings every other week - starting today and continuing every-other-Wednesday at 2:30 p.m.
 - *Please email Medicaid.restart@dc.gov to join the meetings and related mailing list if not on it already*
- The District has hired a contractor to place visuals and audio Advertisements for Medicaid Renewal around the District starting this month and continuing throughout 2023.




Visual Advertisements – Don't Wait to Update!

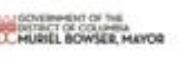


Did you know all DC residents with Medicaid, Alliance, or the Immigrant Children's Program must start renewing their coverage again?



Don't miss out on important information. If you haven't already, take time today to update your address, phone number, and/or email address at districtdirect.dc.gov so that DHCF knows where to send your Medicaid renewal letter.






Then check your mail for info on how to renew. If you need help, please call us at **202-727-5355**.



Don't Wait to Update!

All DC residents with **Medicaid** must renew their coverage this year.

Update your contact info at districtdirect.dc.gov.





Stakeholders are Needed to Assist with Outreach and Beneficiary Engagement



1. Share our materials on your website, social media, centers, and at community meetings.
2. Encourage beneficiaries to update their information and support people who have difficulty creating an account or accessing districtdirect.dc.gov to ensure that they receive the necessary paperwork.
3. Identify individuals you serve who may be at risk for not renewing their coverage and encourage them to access and use our resources.
4. Train existing staff to assist beneficiaries with the renewal process, including completing and submitting all forms and required documents to avoid a break in coverage.
5. Assist individuals who lost eligibility due to non-submission of renewal forms to promptly begin the reinstatement process – there is a 90-day reinstatement period.



What Can Stakeholders Say to Beneficiaries? *Don't Wait to Update!* *Then Check Mail for Important Information!*



What Beneficiaries Can Do Right Now

- Don't Wait to Update!: Update your contact information by logging into District Direct. If DHCF does not have the proper contact information, you will not receive notice of the need to renew your coverage through the mail or other means!
- Check Your Mail: DHCF will mail you a letter about your Medicaid, Alliance, or ICP coverage. This letter will also let you know when it's time to complete your renewal.

What To Do After Receiving Your Renewal Notice

- Complete your renewal by using districtdirect.dc.gov or fill out the form and mail/fax/drop at Service Center immediately to help avoid a gap in your coverage.



Beneficiaries Can Use a Variety of Mediums to Renew Coverage



Medicaid beneficiaries may submit their completed renewals:

☐ **Online:** District Direct allows beneficiaries to complete their renewal, report changes, submit verifications, and view notices online or through the mobile app. Beneficiaries may visit <https://districtdirect.dc.gov/> or download the mobile app through the Apple App Store or Google Play. **Please encourage beneficiaries to complete their renewal online!**

☐ **By Phone:** Call Center (202) 727-5355; Language & Translation Line 1-855-532-5465

☐ **Mail**

Department of Human Services | Economic Security Administration

Case Record Management Unit

P.O. Box 91560 Washington, DC 20090

☐ **Drop-off at a Service Center**

☐ **Fax at (202) 671-4400**



District Direct is available online in English, Spanish, and Amharic!



[Home](#)

[Create Account](#)

[Log in](#)

English

Español

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Welcome to District of Columbia Benefits Portal

TANF/Cash Assistance and Medical Benefits or learn more about all our offered benefits

[Apply Now](#)

[Learn More About Benefits](#)





Key Tips to Connect District Direct Accounts to Beneficiaries



- ☐ Some individuals recertifying will need to connect their account to their established case profile in District Direct.
 - ☐ **Note:** This is a result of the District switching from the legacy eligibility processing system (ACEDS) during the PHE
- ☐ Primary Applicants can connect their account using their Social Security Number, Medicaid ID Number, or Person Reference Number
- ☐ A SSN is **NOT** needed to connect a newly created District Direct account to a primary applicant's case profile
 - ☐ **Note:** Primary applicants in a household can use their Personal Reference Number instead of an SSN
- ☐ Please note that the name used to connect must match what is currently in the system. Names listed on notices reflect what is in the system. For example, if the name in the system is John Doe-Smith, that must be used to connect -instead of John Doe.



Next Steps for Medicaid Renewal



- First set of notices to beneficiaries goes out this week
- DHCF will release a Medicaid Renewal dashboard within the next month
- DHCF will host trainings on District Direct and how to complete Medicaid renewal form. *If you'd like to request a training let us know. Training videos will also be available.*
- Community Meetings on Medicaid Renewal will continue every 2 weeks. Next meeting is April 12, 2:30 pm –see you there!
 - ASL translation services will be provided at subsequent meetings
- Please contact Medicaid.renewal@dc.gov for more information or to get connected to the meetings and trainings.



Questions and Comments



Learn more about DC Medicaid Renewals:

<https://dhcf.dc.gov/medicaid-renewal>

Medicaid Renewal

Medicaid.Renewal@dc.gov



Appendix A

Many Types of Documents are Acceptable Verifications of Income

The following types of documents can be used to verify income:

1. Recent pay stubs (four weekly, two bi-weekly, or one monthly);
2. Completed employer verification form;
3. Statement showing retirement income, disability income, workers compensation income or pension statement;
4. Bank/Checking account statement;
5. Paper, electronic, or telephonic documentation;
6. A written statement which explains the discrepancy if other documentation is not available.



Appendix B: Acceptable Verifications (Residency)



The following types of documents can be used to verify residency:

- An active lease agreement, certified deed, or mortgage statement with a District and their name;
- Phone or Utility bill within the past 2 months;
- D.C. Voter Registration Card;
- Non-expired D.C. motor vehicle registration or D.C. DMV identification card;
- Cancelled check or receipt of mortgage or rental payments within the past 2 months;
- Utility bills and payment receipts with a D.C. address within the past 2 months;
- Non-expired automobile insurance statement with a D.C. residency address;
- D.C. One Card; or
- Completed and signed proof of D.C. Residency Form



Eligibility Categories are Based on Federal Poverty Limits

Parent Caretaker 2023 FPL

The District covers this population with household income up to 216% of the FPL (with an additional 5% disregard)

| Category | Parent/Caretaker/Relative |
|-----------------------------|---------------------------|
| Threshold in FPL | 216% + 5% disregard |
| 1 person household, monthly | \$2,685 |
| 2 person household, monthly | \$3,632 |
| 3 person household, monthly | \$4,578 |
| 4 person household, monthly | \$5,525 |
| 5 person household, monthly | \$6,472 |
| 6 person household, monthly | \$7,418 |
| 7 person household, monthly | \$8,365 |
| 8 person household, monthly | \$9,311 |

Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services

Infants and Children 2023 FPL

The District covers this population with household income up to 319% and 216% of the FPL (with an additional 5% disregard)

| Category | Children (0-18), 319% | Children (19-20), 216% |
|-----------------------------|-----------------------|------------------------|
| Threshold in FPL | 319% + 5% disregard* | 216% + 5% disregard* |
| 1 person household, monthly | \$3,937 | \$2,685 |
| 2 person household, monthly | \$5,324 | \$3,632 |
| 3 person household, monthly | \$6,712 | \$4,578 |
| 4 person household, monthly | \$8,100 | \$5,525 |
| 5 person household, monthly | \$9,488 | \$6,472 |
| 6 person household, monthly | \$10,876 | \$7,418 |
| 7 person household, monthly | \$12,263 | \$8,365 |
| 8 person household, monthly | \$13,651 | \$9,311 |

Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services



Eligibility Categories are Based on Federal Poverty Limits

| Pregnant 2023 FPL | |
|--|---------------------|
| <i>The District covers this population with household income up to 319% of the FPL (with an additional 5% disregard)</i> | |
| Category | Pregnant Individual |
| Threshold in FPL | 319% + 5% disregard |
| 2 person household, monthly | \$5,324 |
| 3 person household, monthly | \$6,712 |
| 4 person household, monthly | \$8,100 |
| 5 person household, monthly | \$9,488 |
| 6 person household, monthly | \$10,876 |
| 7 person household, monthly | \$12,263 |
| 8 person household, monthly | \$13,651 |
| Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services | |

| Adults without Dependent Children (Childless Adults) 2023 FPL | |
|--|-----------------------------------|
| <i>The District covers this population with household income up to 210% of the FPL (with an additional 5% disregard)</i> | |
| Category | Adults Without Dependent Children |
| Threshold in FPL | 210% + 5% disregard* |
| 1 person household, monthly | \$2,612 |
| 2 person household, monthly | \$3,533 |
| 3 person household, monthly | \$4,454 |
| 4 person household, monthly | \$5,375 |
| 5 person household, monthly | \$6,296 |
| 6 person household, monthly | \$7,217 |
| 7 person household, monthly | \$8,138 |
| 8 person household, monthly | \$9,059 |
| Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services | |



Eligibility Category QMB-Federal Poverty Limits

| QMB 2023 FPL | | |
|--|-------------|-------------|
| <i>The District covers this population with household income up to 300% of the FPL (with an additional \$20 for QMB Plus)</i> | | |
| Category | QMB | QMB Plus |
| Threshold in FPL | 300% + \$20 | 100% + \$20 |
| 1 person household, monthly | \$3,665 | \$1,235 |
| 2 person household, monthly | \$4,950 | \$1,663 |
| 3 person household, monthly | \$6,235 | \$2,092 |
| 4 person household, monthly | \$7,520 | \$2,520 |
| 5 person household, monthly | \$8,805 | \$2,948 |
| 6 person household, monthly | \$10,090 | \$3,377 |
| 7 person household, monthly | \$11,375 | \$3,805 |
| 8 person household, monthly | \$12,660 | \$4,233 |
| Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services (+5% income disregard) | | |